

Attorney Docket No.: 022182-000056

**CERTIFICATE OF MAILING (37 C.F.R. § 1.8(a))**

Date of Deposit: January 5, 2004

In re application of: William W. Jacobsen

Serial No.: 09/900,129

Filed: July 6, 2001

Title: LIGNOCELLULOSE FIBER FILLER FOR THERMOPLASTIC COMPOSITE COMPOSITIONS

I hereby certify that the following documents:

Certificate Of Mailing (37 C.F.R. § 1.8(a)), and

1. Transmittal Form (PTO/SB/21);
2. Petition for Extension of Time Under 37 CFR 1.136(a);
3. Original and two (2) copies of the Appeal Brief Under 37 CFR 1.192;
4. Three (3) copies of the Appendix of Pending Claims on Appeal;
5. Check No. 37712 in the amount of \$1,170.00;
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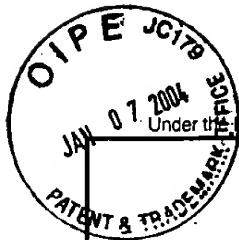
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1711-21A/J  
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/900,129
		Filing Date	July 6, 2001
		First Named Inventor	William W. Jacobsen
		Group Art Unit	1711
		Examiner Name	Rajguru, U.
Total Number of Pages in This Submission	Attorney Docket Number 022182-000056		
<b>ENCLOSURES (check all that apply)</b>			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group ( <i>Appeal Notice, Brief, Reply Brief</i> ) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <i>Appeal Brief Under 37 CFR 1.192    Check No. 37712 for \$1170.00    Return Postcard</i>			
Remarks			

#### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	JENNIFER L. SKORD, (REG. NO. 30,687) MOORE & VAN ALLEN
Signature	
Date	January 5, 2004

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Typed or printed name	Katie M. Efland		
Signature	Katie M. Efland	Date	January 5, 2004

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